

**Application for Registration of  
Foreign Limited Partnership**

Pursuant to the provisions of Section 79-14-902 of the Mississippi Code of 1972, as amended, the undersigned Limited Partnership applies for Registration to transact business as follows:

**1. Name of Limited Partnership Business Email Address** \_\_\_\_\_

⇒

**2. Formed under laws of the jurisdiction or state of****Date Formed**

⇒

**3. Street Address of the Office required in the state or country under the laws in which it was organized (complete if applicable)**

⇒

Address

⇒

City, State, ZIP5, ZIP4

**4. Street Address of the Principal Office in the state or country under the laws in the state in which it was organized (complete if office address is not required)**

⇒

Address

⇒

City, State, ZIP5, ZIP4

**5. Name, Street and Mailing Address of the Registered Agent in Mississippi**

⇒

Name

⇒

Physical  
Address

⇒

P.O. Box

⇒

City, State, ZIP5, ZIP4

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**6. A list of the names and addresses of the limited partners and their contributions, together with an undertaking by the foreign limited partnership to keep those records until the foreign limited partnership's registration in this state is cancelled, is kept at**

⇒ Address

⇒ City, State, ZIP5, ZIP4

**7. Name and Address of General Partner 1**

⇒

⇒ Physical Address

⇒ P.O. Box

⇒ City, State, ZIP5, ZIP4

**8. Name and Address of General Partner 2**

⇒

⇒ Physical Address

⇒ P.O. Box

⇒ City, State, ZIP5, ZIP4

**9. Name elected to use in Mississippi**

⇒

By: Signature

(Please keep writing within blocks)

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Printed Name

Title

**Acknowledgment**

State

County

I,

a Notary Public, do hereby certify that on the

day of

19

,

,

who being by me first duly sworn, declared that he is a general partner of the above Limited Partnership and personally appeared before me declaring that the statements herein contained are true.

Notary Seal

(Keep seal within block)

Notary Public

My commission expires